THE Medical Missionary

Summer, 1946

VOL. XX

No. 7

IN THIS ISSUE:

THE MISSION INTENTION 99
Greater zeal of Catholic natives for the conversion of others

WOMEN OF INDIA 100
Gertrude Emerson

ABRAHAM—SON OF YUSUF 103
Sister M. Leonie Tummers, S.C.M.M., M.D.

HARVEST OF RICE 105
Sister M. Pauline, S.C.M.M., R.N.

FACTS ABOUT LEPERS 107
Sister M. Elise Wijnen, S.C.M.M., M.D.

NEWS FROM AT HOME AND ABROAD 109

THE MISSION CLIPPER 111

ACROSS THE PAGES . . .

"WOMEN OF INDIA" is another of Gertrude Emerson's sympathetic and understanding descriptions of Indian life and custom, as she knew it in the village of Pachperwa.

"HE IS NOT SICK—ONLY A LITTLE THIN," was Yusuf's refrain as he brought Abraham—age two years, weight eight pounds—to Holy Family Hospital in Patna. And there are many Abrahams in India!

"HARVEST OF RICE" is Sister M. Pauline's description of rice farming in India. Everything is done by hand, by a special caste and according to special rubrics.

"FACTS ABOUT LEPERS" is really different from the ordinary article on lepers and leprosy. Six years experience as a mission doctor in India have given Sister M. Elise plenty of opportunity to study and observe this health problem.

YOUR WILL . . . . .

can help the Medical Mission Sisters bring health and healing to the sick and suffering of mission lands. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of $..... for its general purposes."

THE
MEDICAL MISSIONARY
8400 Pine Road
PHILADELPHIA, PA.
Member of the Catholic Press Association
SISTER M. LOYOLA, S.C.M.M.
Editor
Published monthly except July and August by The Society of Catholic Medical Missionaries, Inc., 8400 Pine Road, Philadelphia 11, Pa., in the interest of Medical Missions and Women of the Orient.
SUBSCRIPTION..
$1 per year; $5 for 6 years
Entered as second class matter, September 11, 1928, at the Post Office of Philadelphia, Pa., under the Act of March 3, 1879.

The Society of Catholic Medical Missionaries is a religious community of women founded in 1925 for the purpose of providing medical care for the sick in the foreign missions.

The Motherhouse and Novitiate are located in Fox Chase, Philadelphia, Pa. There is also a House of Studies in Brookland, Washington, D. C., and Houses of Postulate in England and Holland.

The main activities of the Society include the conducting of hospitals, dispensaries, maternity and child welfare centers, training schools for native nurses and midwives, and similar health works.

Medical Mission Centers conducted by the Society in India and the United States are:

HOLY FAMILY HOSPITAL
Rawalpindi, India
HOLY FAMILY HOSPITAL
Patna, India
MITFORD MUNICIPAL HOSPITAL.
Dacca, Bengal, India
THE SANTA FE CATHOLIC MATERNITY INST., Santa Fe, N. M.
THE CATHOLIC COLORED CLINIC
Atlanta, Georgia

It is the purpose of the Society to send Medical Missionaries to any mission field of the world. The Society has many requests; it needs many vocations.

For further information apply to:

Sister Superior
MEDICAL MISSION HOUSE
8400 Pine Road, Fox Chase
Philadelphia 11, Pa.

The Mission Intention

Greater Zeal of Catholic Natives for the Conversion of Others

Once more the Holy Father has touched upon the crux of an important mission problem in recommending to the faithful as the mission intention for August—"Greater zeal of Catholic natives for the conversion of others."

That the faith should be brought to the inhabitants of a country by their own people has always been a missionary ideal. The consecration of native bishops, the ordination of priests and the establishment of native congregations of religious men and women is but a practical expression of it. Truly universal as she is, the Church ever seeks to gather all men into the fold of Christ. Red, black, brown, white and yellow—all are her children. In her, as the Holy Father has put it, all "whatever be their origin or their speech, must know that they have equal rights as children in the House of the Lord." In her, too, all share in the mission of the Church—to spread God's good tidings to the very ends of the earth.

Now, more than ever before it is essential that Catholic natives realize the importance of their role. Especially is this true of India. With the country on the very threshold of self-government, the task confronting Indian Catholics is both very serious and very great. We cannot doubt that much of the future growth of the Church in that country will depend directly upon them.

In a recent interview with a correspondent of the London, *Catholic Herald,* Pandit Jawaharlal Nehru, Indian political leader, gave the assurance that the "Indian Christians need have no qualms" about their future when India gains her independence. When asked further to express his views regarding the liberty of Indian Christians to propagate their religion, Nehru answered—"It stands to reason that any faith whose roots are strong and healthy should spread; and to interfere with that right to spread seems to me to be a blow at the roots themselves."

These words are good words, and hopeful, coming as they do from one of India's foremost statesmen and leaders. And certainly we may be justified in our trust that they keynote the thought and policy of an independent India.

But we see in them also, a challenge and an opportunity for Indian Catholics. Today these number almost five million, a little over one percent of the total population of the country. To be sure, this is but a small handful—but among them are Christian communities outstanding for their faith and fervor. Many of these—hundreds of thousands in fact—trace the origin of their faith back to the very age of the Apostles. They are descended from Christians converted by St. Thomas himself. In spite of many severe trials and persecutions they and their forefathers have cleaved to the faith and kept it pure and steadfast throughout all these centuries.

Even now this heritage of faith is bearing marvelous fruit in a fervent and flourishing Christianity, manifest in many religious vocations and in a truly apostolic spirit. It is a faith alive and eager to seize every opportunity. Only lately it has blossomed again in the establishment of a new religious community—our own Medical Mission Sisters of Malabar, South India.

That Indian Catholics will meet their new responsibilities with zeal and courage we cannot doubt. But their problems are grave ones and will demand all that they can give. As members in Christ, we too share in the task now confronting them. And the best help we can give is prayer.

For native Christians, not only in India but in every mission country, let us pray therefore, that strength, courage and great zeal may be theirs for the preservation of their faith and the spread of Christ's Kingdom on earth.

WOMEN OF INDIA

By Gertrude Emerson

The real power of the Indian mother springs from the intensity of her devotion to her family and the life of patient sacrifice she leads. Though the village woman is ignorant of how to care for her child according to modern rules of health—she will feed it whenever it cries and give it wrong things to eat and let it stay up too late—her unselfish devotion leaves an enduring impress on the child. I recall the voice and expression of one Hindu man telling how his mother used to fast when there was illness in the family, as well as regularly two days every month. On these days, the eleventh of the waxing and waning moon, she would eat nothing until after the moon had risen. From the top of a little hill near the house the moon could be seen rising a quarter of an hour sooner than from the house itself. The children always watched impatiently for the first silver gleam above the horizon. Then they would scamper down the hill shouting "Mother, Mother, the moon has risen. Now you can eat." Those fasts, in later years, symbolized for the son the mother's tender concern and deep religious feeling. Every Hindu cherishes similar memories of his mother.

Over and over again I was struck by the simple dignity of the Indian woman. I cannot remember ever having seen a distinctly silly or vain woman in Pachperwa. The graceful sari drawn over the hair and falling to the bare feet, in its utter simplicity, lends an ineffable dignity to the wearer. Kohl about the eyes, henna-stained palms, or soles tinted with lac, are seen now and then but neither rouge nor powder. Older women do not try to appear young, and sex vulgarity is peculiarly absent. A woman's pride rests in the fine red line freshly painted each morning in the parting of her hair—sign and symbol of her wifehood.

Many times among the village women I came upon acts of self-effacing love. One woman came to the house day after day, leading her husband who was suffering from an acute case of trachoma and a bad infection of the face. They lived too far away to make the journey daily, so they moved to the village, finding hospitality at the house of a family of their own caste. Morning and afternoon this faithful wife brought her husband and took him away again. Her painful efforts to understand the directions for his care, the tender solicitude she showed for him, were touching. And there was another case of an ugly little woman of forty or so, also suffering from trachoma. Here the devotion was on the husband's side. I did not dare give her my argyrol or silver nitrate to take home with her. If a drop of something benefits, why not hurry up the cure by using the whole bottle is too often the village psychology. This low-caste woman and her husband walked sixteen miles to and from Pachperwa two or three times a week, in the hope that I might render her a little assistance. Such cases of devotion on the part of the wife for her husband, the husband for his wife, the mother for her children, were countless among the Indian villagers with whom I lived.

But even in Pachperwa there were exceptions to the rule. We were not wholly without sin. The mother of the Pujari who tended the Shiva shrine arrived one morning with red eyes, displaying a badly bruised shoulder and

(Reprinted from Miss Emerson's book, VOICELESS INDIA, through the courtesy of The John Day Company, New York, Publishers)

two swollen fingers. She had had some kind of quarrel with her daughter-in-law, and her son, when he came home, had taken the wife's part. He had beaten her with a lathi, she said, and twisted her fingers.

Finger twisting was too much for me, and I promptly undertook to administer a rebuke. The Pujari was in the habit of bringing me a flower or two from the shrine as he passed by. The following morning when he arrived with a marigold, I coldly refused it, saying I could not think of accepting anything from a man who beat his mother. I added that I did not care to see his face again. Audible murmurs of approval from the audience of sick people on the lawn greeted this remark. After vainly trying to insist that his mother had fallen and so hurt herself, the Pujari, properly humiliated, slunk away. The next day he and his mother appeared together. To my surprise she came forward and begged me, with tears in her eyes, to forgive her son. He stooped quickly and took the dust off her feet, likewise honoring me. More flowers were humbly proffered. This time I accepted them, and peace was restored.

A favorite story in Indian literature is that of Savitri, who wrested her husband out of the cluthes of Yama, King of Death, through the power of her goodness, her austerities and her love. Every Hindu woman knows Savitri. A King and Queen of ancient times were blessed with a daughter after many childless years. The little Princess was named Savitri-Dawn—in honor of the goddess to whom the pious parents had addressed their prayers. When the time came to think of Savitri's marriage, no desirable suitor having presented himself as yet, it was agreed that Savitri should go on a pilgrimage to various holy sanctuaries, seeking spiritual guidance. She set out with a long train of elephants and attendants, in the fashion becoming a princess, and traveled through the forests where saintly hermits had their abode. One day, through the curtains of her palanquin, she spied a handsome young man, carrying a load of faggots, who turned out to be the son of a blind king driven from his throne and now living in exile in the forest. Savitri quickly returned to her father's palace announcing that her heart had found him she sought. She would marry the young Prince Satyavan.

The name had no sooner fallen from her lips than a seer who dwelt at the court began to tremble. He foresaw that one year from that day Satyavan's destiny condemned him to die. If Savitri married Satyavan, she would become a widow. Vainly her father strove to dissuade her from her fatal choice. But since she was not to be deflected from her decision, the marriage was celebrated with fitting observances.

Savitri was accepted with joy by Satyavan and his parents. Laying aside her jewels and rich robes, she went to share their simple forest life. The happy year drew to a close, the secret of impending doom still locked in Savitri's breast. As the time drew near, Savitri fasted and performed severe austerities in the hope that she might soften the heart of the gods. On the fatal day when her husband went to the forest to chop firewood she begged permission to accompany him. Fearfully she watched and prayed. Suddenly a strange weariness overcame him. He lay down with his head on her knees and the pallor of death began to spread over his features. At the same moment a shadowy presence emerged from the deeper forest.

Detaching the soul of Satyavan from his body, Yama, Lord of Death, bound it with his cord and started for his own realm. But footsteps followed him. Turning, he saw Savitri in tireless pursuit. Even Death was touched. "Choose any boon save the life of thy husband," he said "and return from this fruitless journey." First the sight of her blind father-in-law, next the restoration of his lost kingdom, Savitri exacted from Yama, but still she followed. Once more he pleaded with her, this time begging her to choose something for herself. Before her own death then, might she know the blessings of many sons, was Savitri's request. Yama acquiesced, and then she re-

Spinning is an important task in the Indian household.

minded him that a widow does not remarry. Unless he gave back Satyavan his promise could never be fulfilled. So, by her dauntless love, Savitri won her husband from Death himself.

Brides who go from their parents' homes are often enjoined to be "Savitris," but not all of them are spared the sadness of widowhood. The ban against remarriage is a matter of caste law only. It is effective for about one-fourth of the Hindu women but the influence of the Aryan marriage ideal is inescapable, and whether caste law permits widow remarriage or not, Hindu society does not look with approval on the woman who takes a second husband. The custom works merciless individual hardships, especially tragic for those virgin child widows doomed to a life of asceticism. Of these there are a third of a million under fifteen in India.

The position of a widow depends very much on circumstances. If she has grown children, particularly grown sons, she remains the honored mistress of the household. Legally she has the first lien to support in the property of her husband. Surrounded by her sons and their wives and children, she continues to be a directing force in the household, and her life is not necessarily an unhappy one.

But the young childless widow often returns to her own home—usually, in fact, among the poorer people. Whether she returns to her own home or remains with her husband's family, she is expected to follow a life of austerity. Jewelry is no longer for her, and she will wear only a white sari without border. Sometimes she will even cut her hair short. Her food is a simple diet without meat, fish or highly spiced dishes. She will eat but once a day, and she will cook for herself. She will take no part in the household festivities. And possibly —this is the ideal—through leading an ascetic life of self-sacrifice, she will find spiritual consolation for her earthly bereavement.

A widowed sister or aunt is often a source of quiet strength in a Hindu home. It is she, more often than not, who is the family doctor, who cares for the sick, who cooks and cleans and performs countless little services for the others. Sometimes she is reduced to the unfortunate position of family drudge. Sometimes, too, when circumstances free her from other responsibilities, a widow devotes herself to study. The sacred literature is open to her today, and the Indian woman living the traditions of India holds the key in her slender fingers to the wisdom of the sages.

At Mahabali Singh's one afternoon, I noticed a little girl clasping a small thick volume. Mahabali's wife said it was a copy of the Hanumanji. She took the book from the child's hand and began reading aloud. I ventured the opinion that there could not be many women in the village who could read. "Oh yes, plenty can read," she insisted. She promptly led me to the house of a goldsmith a few doors away, where all four women of the family acknowledged shyly that they could read. Then Devi

The unselfish devotion of Indian mothers leaves an enduring impression on their children.

Prasad's widowed sister arrived with her daughter. All the women and the two girls sat upon a large wooden bench in the zenana courtyard of the goldsmith's house and read together from a fat volume of the Ramayana.

They made a charming picture, earnestly bending above the old worn book, the sunlight falling over them and touching their green and yellow and white saris with flecks of gold. As I listened to the chanting of the beloved lines, the drab little court seemed to put forth a graciousness and beauty of spirit. Oh yes, plenty of other women could read, at least ten more besides themselves, they assured me. Even those who could not read knew by heart long passages from the epics and countless songs and legends learned from their own mothers and grandmothers.

And suddenly a comparison of Pachperwa illiteracy and New York literacy thrust itself upon me. From time to time I had been receiving packages of American magazines, sent out to relieve my supposed monotony. The unillustrated ones presented no problem, but for a long time I racked my brains in vain on what to do with some of the illustrated weeklies and monthlies. Nothing was ever wasted in Pachperwa, and sheets of paper, even printed paper, had a thousand uses. For one, the pan seller of the bazaar wanted them to line his booth with, and for another Ram Lakhan wanted them to transform into bridegroom's crowns. Pictures, of course, could be read by any one, and I knew that the village would be deeply shocked by those in my American magazines. It was essential, to save my reputation in Pachperwa, to get rid of those sophisticated representations of love-making, bathing beauties and I know not what else. But there simply was no place to throw anything away. The ground was as hard as a rock. The charcoal stove was in the kitchen, under Din Mohammed's jurisdiction. At last, in the dead of the night, when all the servants were safely asleep, I rose and at the far side of the house, on the path of red brick dust I made a little bonfire of the tell tale evidence of what my civilization contributed for the edification of the literate masses. The illiteracy of the village seemed infinitely preferable. Those legends that in India take the place of daily newspapers and ash-bin reading matter are the true poetry of the people.

In and out of them move all the great characters—both men and women—who have inspired India for thousands of years. Could Western women in one breath name their ideal woman, I wonder? In India the answer would spring instantaneously from all the millions of Hindu women—Sita—Sita—the central star in the great galaxy including Savitri, Kunti, Draupadi, Damayanti Sakuntala, Maitreyi, and many more. Sita is not merely a legend, but a living force in India. Hers is a name that has been spoken millions upon millions of times. Her presence intangibly pervades every household. She is the undimmed, unchanged Hindu ideal of womanhood.

ABRAHAM - - SON OF YUSUF

By Sister M. Leonie Tummers, S.C.M.M., M.D.

It was one of those sultry, hot, pre-monsoon nights in Patna. Clouds came driving over, but brought no rain as yet. My bed was out in the compound to catch the occasional breeze drifting over from the Ganges. A bright half-moon lit up the white mosquito net where dozens of insects were trying hard to find a hole to enter in. A little lizard went dashing back and forth over the net, with each dash catching an unwary mosquito. The catch was good this night, and Mr. Lizard seemed more than usually energetic, or was I more than usually awake? Sleep does not come easily on a night like this. One just keeps tossing and turning in an effort to find the coolest spot—and that does not exist. The bazaar, too, was noisy. At this time of year it comes to life only in the cool of the evening and the shops remain open until all hours, lit up by the picturesque but smoky oil lamps.

All of a sudden there was a great yelling and tamasha in the bazaar. Many voices shrieked excitedly, but listen as I would I could not hear the familiar "Chor, chor," — the signal that a thief was being pursued. The noise came nearer and nearer. A loud banging on the gate and a desperate "Memsahib, memsahib!" showed there was something doing in our line. After another bang or two and more excited calling, the night Sister opened the gate. It was like pouring oil on troubled waters. There was still much excitement and a lot of talk, but the fear in the voices had disappeared. Apparently they were making an arrangement with Sister. As I do not have to get up until I am called, I turned over, musing what it was

all about. A difficult baby case? Or perhaps a baby had swallowed something it should not have? Or maybe it was cholera? It has the power to prostrate its victims in a few hours, and there was an epidemic in Bihar. But nothing happened — the gate was locked, the voices died away, a cool breeze came floating over and eventually I fell asleep.

The next morning the explanation of the tamasha was offered. The people had come to ask whether they could leave a baby here for a few days. Its mother had become *pagal*, that is, mental, and had threatened to kill the baby, a precious boy. The father would come to make the final arrangements. He did, for as we reached the nursery on our rounds, a big, hefty Mohammedan was fondling a miserable little mite.

"There is nothing wrong with him, Memsahib, but his mother is pagal. She will be all right in a few days. Kindly allow him to stay until then."

"Why surely, but how old is your son?" Sister asked.

"Two years, Memsahib," adding as he noticed our incredulous looks, "He is all right, he is not sick at all, not at all, only a little thin."

"What is his name?"

"Abraham. He is not sick at all, Memsahib, really not. Only keep him here until his mother is better. Can I have a *chiti* so I can get my son back when his mother is better?"

"What is your name, and where do you live?"

"My name is Yusuf and I live very near to the hospital." So the man received his letter to the effect that he had brought his son, Abraham Yusuf, to the hospital and that the same would be returned to him on his request.

"Now give us your address so we can let you know, just in case your son gets sick. He looks weak, you know."

"Yes, yes, but he is not sick, only a little thin." As the man left the hospital he was still murmuring, "He is not sick, only a little thin."

Abraham, son of Yusuf, was as his father said, two years old. Surely he was "a little thin," for he weighed exactly eight pounds! That is what a large American baby weighs at birth. He could not sit up alone, and when we tried to make him stand with support, of course, his thin little sticks of legs seemed to break, his knees wobbled and he flopped down on his cot with a forlorn wee smile on his too large face. He had a few teeth, four upper and four lower incisors and a molar. His head was too large for his body. His ribs were very prominent. So was the "rickety rosary" or the beading which occurs on the rib cartilages as a result of deficiency disease rickets. His abdomen was protuberant, due to a weakening of the anterior abdominal wall. His legs were crooked. He did not smile often, but just lay in his cot, apathetic and dull.

The first week he was with us Abraham put on twelve ounces and looked brighter. Once when he was having his sunbath on a mat with the other babies, Sister tried to make one of them clap her hands, and saw Abraham give a little shriek and begin clapping his tiny hands with glee.

The next week the effect of the change from starvation diet to a normal two-year-old feeding began to show. He developed some diarrhea and lost a few of his precious ounces. We adjusted his food and he went up again, this time at a much slower rate, a few ounces a week. Today he is still "not ill, only a little thin,"— but what about the rickets, scurvy, under-developed growth, amoebiasis, and what not? It will take a lot of careful planning of diet, cod liver oil and vitamins to make Abraham, the son of Yusuf, the lively youngster he has a right to be. And there are many Abrahams in India . . .

"This is lots of fun!"—in the nursery at Holy Family Hospital, Patna.

HARVEST OF RICE

By Sister M. Pauline, S.C.M.M., R.N.

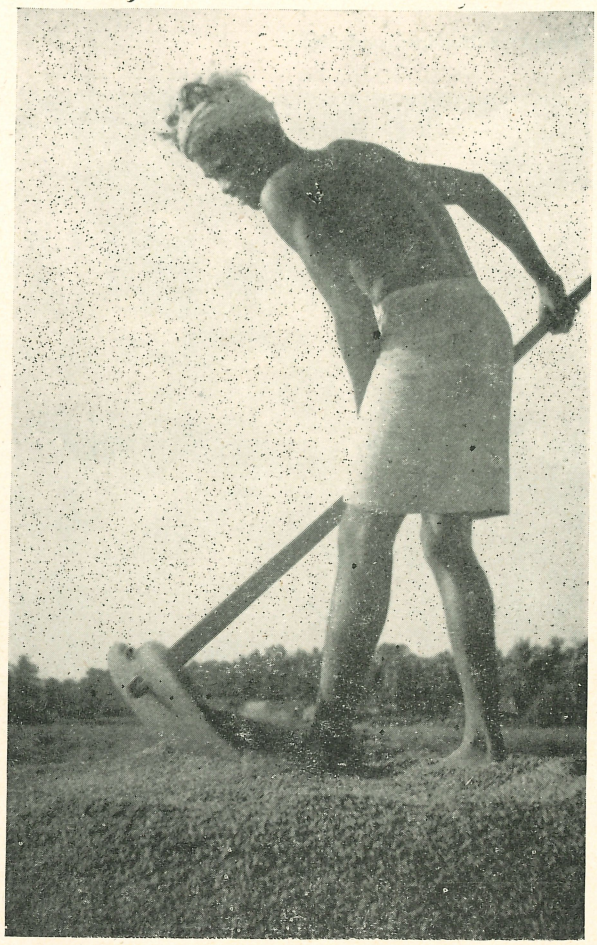
In our own day of labor-saving devices, machinery is still rather the exception than the rule in India. This is especially true of farming, which in most parts of the country means rice farming, for the tiny pearly grain furnishes the staple food for the majority of India's millions.

In Malabar, as in other provinces of India, rice is grown and harvested according to the most primitive methods. From the end of our compound here in Mary Giri, we can look out over an ocean of water—nothing but water as far as the eye can see. Anyone not acquainted with rice farming would find it hard to believe that these flooded fields are productive of anything but rushes and reeds. But by dint of much sweat and hard work the Indian farmer will transform this expanse of water into beautiful green paddy fields patterned with neat mud walls and orderly little canals.

The work of the rice farmer begins while the ground is still covered with water. Within a period of three months the soil must be plowed three or four times and fertilized. Buffaloes draw the heavy wooden plows, guided by the men who wade in water up to their waists. No wonder that at the end of the day both men and beasts are a sorry mud-covered sight.

As soon as the plowing is finished it is time to sow the seed, usually about the end of November or the beginning of December. But first of all the water must be pumped off the land. This is done with oil pumps and by hand. Then the coolies toil both day and night, until the "ocean" is driven into canals or into nearby streams and rivers. Neat mud walls are next built around each field to protect the crops against sudden floods. Thus the ground is made ready for sowing.

Though this may involve hundreds of acres, the sowing is also done by hand, with the sowers walking backwards in the process. Once the seeds are in the earth, it is not long before they begin to germinate, producing tender green shoots. By the end of December they have already grown a few inches and provide a favorite "straw" for the children's Christmas cribs.



The rice "king" turns the grain which has been spread out to dry.

At this time there is a lull in the work, with nothing to do while the plants are coming up except to see that the mud walls are kept in good condition and to irrigate the land as often as necessary. Fertilizer is also scattered over the fields during this interval.

But the lull is all too brief, for in four to six weeks the really busy time begins once more. Parts of the land that are too thickly planted must be thinned out and the rice transplanted into the more sparsly sown areas. Again the transplanting is done by hand. The *puliahs*—a special caste—have the monopoly on this work. Men, women and children plant side by side. As they bend under the hot Indian sun their work is helped along by many songs, all suited to the type of work and the action they are doing. Even tiny babies are brought to the fields and are cared for by their older sisters.

In all this there is one head *puliah*, called the "king" of the land. It is he who directs the

Tying the paddy into bundles

labor and decides when the land should be irrigated, weeded, harvested, etc. Even the owner of the rice paddy must bow to his orders, for the "king" is *always* right. Usually the "kingship" is inherited, passing from father to son in the same family for each succeeding generation. Under this head man are subordinates who in turn supervise every six or seven coolies.

Once the transplanting is over, there is still much to be done in the form of weeding and irrigating. And now the many troubles of the rice farmer begin. If the canals or rivers overflow, the mud walls may give way and the crops be destroyed by water. Or the paddy may be attacked by hordes of insects. In this case the priests are called to bless the fields and the owners make an offering. If the weather happens to be cloudy the fields become infected with millions of worms. These are very destructive, but can be overcome by means of ducks which are let loose in the fields. Sometimes flocks of *eerendah*, a sort of bird resembling a duck, fly down from the mountains and take possession of the rice paddy. If this happens the owner is completely out of luck for he will have nothing to harvest!

If all goes well, however, the harvesting will begin ninety to about a hundred and twenty days from the time of sowing, according to the particular seed used. The harvest season is always a joyful time for all. Once again everything is done by hand, each plant being cut by means of curved scythes. When the paddy has been all cut down it is tied into huge bundles and carried to a special plot for each worker or group of workers. As soon as every bundle is gathered the threshing begins, that is, the paddy is separated from the plants. But do not think this resembles our modern threshing. This work is done not by hands but by the feet!

A crowbar of bamboo is suspended high enough for the coolie to grasp. Holding onto this bar, he tramples the paddy underfoot. The treading is kept up day and night in time to a catchy little tune which is chanted almost continuously, until every golden grain is freed from its hull.

And now all is ready for the final step, the measuring of the rice. This all-important duty is performed by the "king" himself, who sings while he measures. For the rice there are thirty-two basket measures of graded sizes, the smallest being about as large as a breakfast cup. The wage of the worker is one measure of each size for every ten measures. In other words, the workers receive the eleventh of each size.

Lastly the fields are flooded once more so they will not dry out. According to this method only one harvest can be reaped a year. And this is why, after a disaster such as the Bengal famine or the destruction resulting from the Burma war, it takes years for the farmers to produce their normal crops, while starvation continues to take its toll.

To be always correct is a dangerous thing. I have noticed that the people who are late are often so much jollier than the people who have to wait for them. —E. V. Lucas.

Facts About Lepers

By Sister M. Elise Wijnen, S.C.M.M., M.D.

Missionaries the world over are familiar with the fact that nothing draws an audience like a talk about leprosy. At first this would seem rather curious. Why leprosy, rather than tuberculosis, which is much more deadly, or malaria, which is much more prevalent? Yet it is easy to understand why leprosy is by far the most pathetic of all diseases known to man. It is both crippling and deforming, arrested only with great difficulty and in a small percentage of cases. Worst of all, the social ostracism it causes is even harder to bear than pain and illness.

Add to these the long and well known history of leprosy, dating back to Biblical times, and the gripping tale of the heroism of Father Damien de Veuster on Molokai, and it is not so strange after all that leprosy should tug at the heart-strings. It is always the spectacular and dramatic that draws attention, rather than the ordinary, everyday suffering common to all mankind.

Leprosy is a considerable problem in India. The number of lepers is estimated at one million. Registration and isolation of patients with infectious diseases is so defective in this country that statements of this nature are largely guess work. But even a cursory visit to India will reveal that there must be a great many lepers. They can be seen in the streets in any sizable town, miserably crippled beggars in all stages of deformity. Yet in India leprosy is not considered a major problem. There are so many more pressing matters: malnutrition, famine, annual epidemics, malaria, infant mortality, etc., etc., that the victims of leprosy must wait their turn.

When American Catholics think about lepers, no doubt they conjure up a vision of a group of low thatched buildings under tropical skies and waving palm trees, housing a happy family of pitiful cripples, hobbling about on crutches, bandaged and cared for by devoted nuns. True enough, as far as it goes, but unfortunately it does not go very far. Only a very small percentage of the lepers of India live in hospitals or institutions. The rest roam the countryside as beggars, sit in the back rooms of crowded houses, or live in the jungle on sweepings and charity, hit and miss.

Here is another fact which will seem strange: lepers are very difficult patients. In the first place, commonly they are not really sick at all. They are neither feverish nor in pain, nor particularly indisposed. They have their bouts of illness, but in between they feel fairly well despite their sores and their rotting fingers and toes. Consequently, they do not belong in a general hospital. To keep them in bed would be needless cruelty. Who would want to live in a hospital ward for years on end? Naturally, the Indian lepers value their freedom, and to admit them to a general hospital is simply to ask for trouble.

That leaves two ways of caring for them: the colony and the dispensary. Leper colonies are badly needed in India. Adequate and humane treatment of lepers can be carried out in such institutions, but they require outside aid (as they cannot be expected to be self-supporting) and they swallow up a great number of workers—doctors and nurses, housekeepers supervisors, farm workers, etc. Large grounds, suitable soil and climate, expert advice in the matter of occupations, all are needed to make a leper colony a success.

The dispensary method is both cheaper and easier. In the early stages lepers are not cripples. They can live at home and go about their business. With a few reasonable precautions, spread of the infection can be minimized. The danger is much less than with tubercular patients! This method favors early diagnosis and treatment, just as compulsory isolation makes for deception and delay. The treatment is not difficult, although it requires specialized training and some experience on the part of doctors and nurses. Weekly injections, regular distribution of tonics and vitamin preparations, even dressings of sores and gangrenous limbs, can be done in the out-patient department.

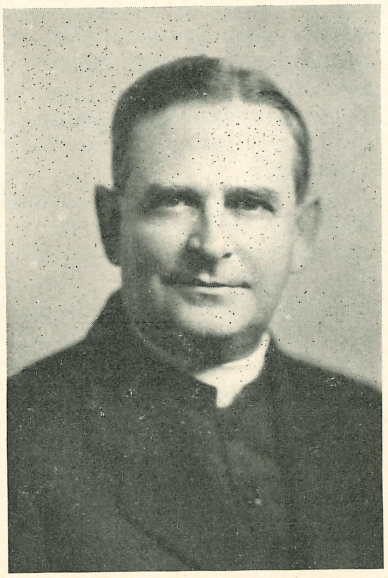
The great difficulty is to get the patients to come regularly. For that an efficient social service department is needed. Home visiting is essential, to make sure that living conditions are satisfactory, to see that the isolation pre-

cautions are carried out and to keep the patient in regular attendance in the clinic. This is the method used by several Protestant mission hospitals in South India and it is said to be eminently satisfactory. Both stationary dispensaries and leper trucks are used, with excellent results.

No doubt the best way to care for lepers is a combination of the above described methods. The majority of the patients can be managed by clinics, but there should be a place for the homeless, the hopelessly crippled and the unstable. Many lepers will be happier in a colony, where they have companionship, security and care such as they cannot get elsewhere. Others want to stay with their own people and continue their usual occupations such as a colony can hardly provide for them. With a combination of leper colonies and a group of dispensaries, or even a flock of leper trucks, it would be possible to care for all these patients in the way best adapted to their needs and desires.

Meanwhile, there is hardly a Catholic colony or a dispensary for lepers in the whole of India. We see dozens of lepers in our own hospital and dispensary. We try to help them and make them come regularly, but without a special set-up for their treatment it is almost hopeless. Lepers do not mix with other patients and they will not stay in the general wards. Sometimes we do get a case like Mohammed Ali, a young reasonably well-to-do, and educated office worker, who has the round red patches of early leprosy. He knows how to follow directions and makes regular visits to the dispensary for his injections. But what about the poor and those who do not understand that persistent treatment is an absolute necessity? We see them every day. They come for a bandage and a meal, and move on again to the next station. They are bound to fall into the hands of quacks and end their days, hopeless cripples. India is full of them, and leprosy will continue to spread until they can be cared for as they should be.

Familiarity breeds contempt. Even the suspicion of leprosy is enough to strike terror into the bravest heart. Yet society as a whole can be unbelievably callous to the problem of leprosy. Nothing can stamp out this disease but adequate medical care for the whole of India, sound public opinion, and social consciousness. Until then, the care of lepers will remain a difficult task, needing all the generosity of which Catholic America is capable.



Rev. Francis X. McBride, C.S.C.

R. I. P.

It was with deep regret that we learned of the death of the Rev. Francis X. McBride, C.S.C. on June eighth.

The death of Father McBride is a great loss indeed, not only for our Society, but for each of our Sisters personally. Father McBride was intimately associated with the community even before its foundation. It was he who arranged the first draft of the Constitutions of the Society in canonical form. All through the years he was to the community a loyal and generous friend —generous with his time, with his wide experience and knowledge, with his talents.

Above all, Father McBride exemplified for us the self-sacrificing spirit of the priests of Holy Cross. As chaplain, confessor, teacher, advisor, and always as a friend, his gracious kindness and his Christ-like charity were known to all.

The death of Father McBride is felt by us most keenly. We are grateful to the Congregation of Holy Cross for having given us such a generous share in his priestly ministrations. We now share with them his loss and unite with them in grateful and prayerful remembrance for the repose of his soul.

News from At Home and Abroad

At Home

Novitiate News

It's departure time at the Motherhouse again, with no less than twenty-six of our Sisters setting out for the new novitiate directly across the road from our house here in Fox Chase! Yes, St. Theresa's Novitiate is ready and the novices and postulants are happily installed in their new home.

Perhaps you will recall that last November we told you about the purchase of an old property, known as Ury House. It is an historical place. Many believe it to be the oldest house in Pennsylvania, and it is certain that much of the present structure dates back to colonial times. John Adams, John Audubon, Henry Clay and many other famous men visited Ury. And believe it or not, all the historical accounts agree that George Washington once ate *salted* strawberries there! The Crawford family, from whom the Society purchased the property, had owned Ury House since 1814—so there's a long, long story behind our new novitiate, and, let us hope, many, many happy years ahead.

All through the winter and early spring the house has been in the process of transformation. Walls have been reinforced, plastered and painted. New windows and doors have been cut in. The electricity and plumbing has been completely done over—and Ury House has become the new "St. Theresa's Novitiate."

Transformation

But the old colonial home has lost none of its former beauty. In fact, paint and varnish and repairs have restored and enhanced it. The lovely old drawing rooms have been transformed into a beautiful little chapel. The large old-fashioned wainscoated kitchen and laundry have been combined to make a big airy classroom, and the two master bedrooms upstairs have been turned into recreation rooms. The basement, with its old thick walls and dark nooks and corners has been changed most of all, to furnish a kitchen, laundry and refectory.

Through it all the novices and postulants have been cleaning and scrubbing and scouring, looking forward to the day when they would move into their new home. During the long winter months and early spring it seemed as though that time would never come—but of course it did, and in late May the first wagonload of furniture was hauled across the road. After that, Sisters and household goods began to move in earnest. Some remained to live there.

First Mass

The climax came on Friday, May 31st, when His Eminence, Cardinal Dougherty, assisted by the Rev. Joseph J. McGlinn, S.T.D. and the Rev. John J. O'Rourke, C. S. C., celebrated the first Mass to be offered in the old-new home.

After the Mass the Cardinal spoke to the novices and postulants who were lined up in the hallway to greet him. In the course of his talk he gave a resume of the history of our Society, recounting how Mother Dengel went to see him before the community

The novices' new home— St. Theresa's Novitiate

was founded, "dressed very much like you," he said, and told him about the great need for women doctors in India. It was during this very first meeting that the Cardinal said he asked Mother Dengel, "Why don't you found a community of Sisters for this purpose?"

His Eminence also spoke of the Decree of Propaganda Fide promulgated by Pope Pius XI in 1936, which permitted and in fact urged that religious communities of women take up medical work in mission countries, and which gave official sanction to the work of our own Society, founded only eleven years before. Cardinal Dougherty himself was highly instrumental in securing this most necessary approbation from the Holy See.

In conclusion His Eminence made a comment which thrilled every novice and postulant there—"If I were not a priest," he told them, "I would be a Medical Missionary!"

Departure

On June first and second, the two days following the first Mass, the novices and postulants entertained all their friends and relatives at "open house." And then, finally, all the rest moved across the road to keep house. We sang and rang them off to their new home on June 14th. Yes, we had a real Medical Mission departure, with every bell, even the big Angelus Bell, Brenden, ringing out farewell and our good wishes for many, many happy days to come, to our little Sisters across the way.

India

Rawalpindi

Last month Sister M. Alma Julia wrote about the breaking of ground for the new Holy Family Hospital in Rawalpindi—and our hopes of getting the cornerstone for the hospital laid in April. Well, our wishes have come true, for Mother Dengel herself described that event in a letter sent from India in May. Incidentally, we have the good news that Mother Dengel is homeward bound, having sailed from Bombay for England on June first.

Laying of the Cornerstone

Of the laying of the cornerstone she writes— "The laying of the foundation stone was on April 28th. Everything went off according to program, thanks to the careful preparations of Sister Alma Julia and all concerned. A *shamiani* (a kind of tent with a roof and no sides) was erected with about 200 chairs and a table for the speakers' platform. The road was marked out as the hospital site is in quite an open space with no buildings around. Police were posted to show the way.

"The official opening was at 9:30 a.m. The Very Rev. Father Meyer, the Pro-prefect, presided and spoke on behalf of the sisters. Mr. Cuthbert King, the Commissioner, who has been specially interested in the new hospital also spoke. He said that the only wealth we can take with us is what we have given in charity, and referred to the two laws given by God, to love Him and to love our neighbor. He also said that the hospital will be one of the finest in the north of India and will be a great blessing for Rawalpindi and the surrounding territory.

"A Mohammedan gentleman, the Municipal Magistrate, then gave an address in Urdu in which he enumerated the services rendered by the Sisters during the eighteen years of existence of the present Holy Family Hospital. He also gave the hospital statistics, saying that the past argues well for the future.

"Mrs. Cuthbert King, who had kindly consented to lay the foundation stone, then said a few words. She expressed her happiness, particularly at the prospect of having a large training school for nurses here. Mrs. King has been interested in the improvement of health facilities for the people of Rawalpindi and the neighborhood for many years.

"Finally a Sikh gentleman announced the donations thus far received. Then Mrs. King, accompanied by the contractors, Very Rev. Father Meyer, Rev. Father White and myself, descended by steps into the pit where the foundation stone was to be placed. Father Meyer blessed it and Mrs. King deposited in it some religious articles, including a picture of the Holy Family, coins of the period and in a small bottle a resume of the history of the Catholic Medical Mission to Women and Children in Rawalpindi, with all the names of the Sisters at present stationed at Holy Family Hospital. The list was enclosed in the stone and cemented down by Mrs. King.

The foundation stone laid—we have reached and passed another very important step towards our goal— a large new hospital for Rawalpindi. The hospital report for the past year again shows a considerable increase in patients and in work. It makes us more eager than ever that the building of the new hospital may be speedily and successfully completed. Therefore, we beg of you—please keep Holy Family Hospital particularly in your prayers and your interests.

Patna

Wanted—One Icebox

Medical Missionaries will never be through building it seems—and looking for necessaries. Just the other day we received a letter from Sister M. Elise, M. D. from Patna. She's still looking forward to a new hospital with an *icebox!*

"We hope to start building in Patna very soon," she writes. "Once we have a real hospital there will be no holding us back. It will be grand to be able to give our patients better care. For example, I don't think any of us mind being without an icebox for ourselves. There is so much indescribable poverty around us that we would be ashamed to think of our own inconveniences and discomforts. But it hurts not to be able to give the sick the best possible chance for recovery.

'Take penicillin, for instance. We received about twelve boxes of it from the Army. It worked wonders. Cases of puerperal sepsis, peritonitis and cancrum oris, all melted like snow in the sun. But it is getting hotter now, and soon we will not be able to use it anymore. It would keep on ice.

"And the poor babies! We boil the milk three times in twenty-four hours and yet it goes sour. Even powdered milk has to be made up for each individual feeding. What we wouldnt give for an icebox!"

The Mission Clipper

OUR LADY OF THE INDIANS

On May 17, 1673, with five other Frenchmen, in two canoes, Marquette and Joliet set forth on their voyage of discovery of the Mississippi, the "Father of Waters."

"Above all," writes Marquette, "I placed our voyage under the protection of the Blessed Virgin Immaculate, and promised her that if she obtained us the grace of discovering the great river, I would give it the name of Conception, as I would do to the first mission I should establish among those new nations."

On Thursday in Holy Week, 1675, he spoke to all in public. Five hundred chiefs and ancients formed the first circle, nearest to the Father. Fifteen hundred young warriors gathered behind them. The women and children formed the outer ring.

Thus he preached to them the doctrine of Christ crucified; the Gospel of God's Son made Mary's Son for them. He offered up the Sacrifice of the Mass for their conversion. On Easter Sunday he celebrated Mass again, and claimed that land as a possession for the Most High God. He gave the mission the name of the Immaculate Conception of St. Mary.

The good Indians received his message with joy. His mission was securely founded, and his work was done.

—*The Servite*

CATHOLIC PROGRESS IN INDIA

Catholics in India total almost 5,000,000 according to the most recent reports. Archbishop Leo Kierkels writes in the *Bombay Examiner* that more missionaries from abroad are preparing to sail for India, but the bright prospects for the Church are based even more on the growing number of native clergy who already count two-thirds of the nearly 5,000 priests in India. Native sisterhoods are also flourishing and many converts are being made among the educated.

—*Jesuit Missions*

NEW CURE!

When Father Charles, a young Capuchin missionary in Nicaragua, was stung by a wasp, a little girl asked to see the injury. Before he could withdraw his hand, she swabbed it with ink. The Padre expressed his worry that the hand might become infected. The child assured him that the ink would do the trick and reduce the swelling. It was a strange remedy, but it worked. The medication is an old and tried one among Nicaraguans.

—*The Cowl*

PRESS VENTURE IN CHINA

A new venture in press work is the *Causa Nostrae Laetitiae,* a Chinese monthly review inaugurated in the Women's Section of the Aurora University at Shanghai some time ago by the Religious of the Sacred Heart.

CATHOLIC WOMEN'S COLLEGE —INDIA

The Carmelite Missionary Sisters of Trichur, South India have been commissioned by His Excellency, the Most Rev. George Alapatt, to open a Catholic college for women in time for the opening of the academic year. This college will prepare Indian women for service in the professions, contributing to the formation of informed Catholic leadership among the people of Cochin State. A three-story building has been erected through the sacrifices of the Bishop, native Catholics and Sisters. To furnish it and provide quarters for resident students, the Sisters need additional help. The appeal comes from Mother Marina, Superior of the Carmelite Missionary Sisters of Trichur, Cochin State, South India.

—*The Lamp*

R. I. P.

Please pray for the repose of the souls of:

Rev. William K. Leahy, Philadelphia, Pa.

Sister M. de Chantal, Baden, Pa.

Mrs. George Muir, New York, N. Y.

Mr. Frank Daly, Washington, D. C.

Mrs. Alfred J. Kaad, Milwaukee, Wis.

May their souls and the souls of all the faithful departed through the mercy of God, rest in peace. Amen.

He seems to me a very foolish man, and very wretched, who will not increase his understanding while he is in the world, and even wish and long to reach that endless life where all shall be made clear.

—King Alfred.

NOTICE TO SUBSCRIBERS

Owing to difficulties in obtaining paper we were unable last year to supply the full ten issues of the Medical Missionary. We are happy to be able to send you this additional summer issue now, to make up for this deficit.

MISS ELIZABETH S. KITE C
ACAD. ASSUMPTION, W. SCHOOL LANE
PHILA., PA.

A Physician's Prayer

Dear Lord, Thou Great Physician, I kneel before Thee. Since every good and perfect gift must come from Thee I pray:

Give skill to my hand, clear vision to my mind, kindness and sympathy to my heart.

Give me singleness of purpose, strength to lift at least a part of the burden of my suffering fellowmen and a true realization of the privilege that is mine.

Take from my heart all guile and worldliness, that with the simple faith of a child I may rely on Thee. Amen.